Image# 201907169151385462 PAGE 1 / 2

FEC FORM 2

STATEMENT OF CANDIDACY

=												
1.		of Candidate										
		McCready, Daniel, , , b) Address (number and street) ☐ Check if address changed						2. Candidate's FEC Identification Number				
	PO Box 78855				Check if address changed			H8NC09123				
	(c) City, S	tate, and ZIP	Code					3. Is This	s Ne	ew .		Amended
	Charl				NC	2827	7-9770	Staten	ment (N) OR		x (A)
4.	Party Affili			5. Office Soug	ht		6. State & Dis		date			
	DEMOCI	RATIC PART	Υ	House			NC	09				
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE											
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2019 (year of election) election(s).											
	NOTE: This designation should be filed with the appropriate office listed in the instructions.											
	(a) Name of Committee (in full)											
	McCready for Congress											
	(h) Addres	ss (number ar	nd street)									
	` '	ox 78855	iu street)									
	(c) City, S	tate, and ZIP	Code									
	Cha	rlotte					NC	28277	7			
			DE	SIGNATIO	N OF OT	HER AU	THORIZED	СОММІТ	TEES			
							g Representativ					
8	I hereby a	uthorize the f	ollowing nam	ned committee	which is NO	T my principa	al campaign co	mmittee to re	eceive and ex	nend fund	ts on t	nehalf of my
0.	 I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. 								oonan or my			
	NOTE: Th	is designation	n should be f	iled with the pr	ncipal campa	ign committe	ee.					
	(a) Name	of Committee	(in full)									
	Mc	Cready \	ictory F	und								
	(I) A I I	/ 1	1 ()									
		ss (number ar Cummins Wa										
	(c) City, S	tate, and ZIP	Code									
	Miss	oula					MT	59802	2			
	I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.											
Signature of Candidate Date												
McCready, Daniel, , ,				[Floatnonically Filed]			07/16/2019					
	[Electronically Filed]											
<u> </u>												
NC	NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.											

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

Page	² of	2
rade	OI	

DESIGNATION OF OTHER AUTHORIZED COMMITTEES(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds candidacy. NOTE : This designation should be filed with the principal campaign committee.									
	(a) Name of Committee (in full)	ame of Committee (in full)							
	Serve America Victory Fund	Serve America Victory Fund							
	(b) Address (number and street) PO Box 2013								
	(c) City, State, and ZIP Code								
	Salem	MA	01970						
8.	I hereby authorize the following named committee, which is NOT my principal		nmittee, to receive and expend funds on behalf of my						
	candidacy. NOTE : This designation should be filed with the principal campaign committee.								
	(a) Name of Committee (in full)								
	House Victory Project								
	(b) Address (number and street) 918 Pennsylvania Avenue, SE								
	(c) City, State, and ZIP Code								
	Washington	DC	20003						
8.	I hereby authorize the following named committee, which is NOT my principal candidacy. NOTE : This designation should be filed with the principal campaig (a) Name of Committee (in full)		nmittee, to receive and expend funds on behalf of my						
	(b) Address (number and street)								
	(c) City, State, and ZIP Code								
8.	I hereby authorize the following named committee, which is NOT my principal candidacy. NOTE : This designation should be filed with the principal campaig (a) Name of Committee (in full)		nmittee, to receive and expend funds on behalf of my						
	(b) Address (number and street)								
	(c) City, State, and ZIP Code								